

198

FROM:

T NELSON
BOX 1546
POUGHKEEPSIE NY 12603

YOUR
5¢ STAMP
HERE
WILL HELP

THE EPILEPSY FOUNDATION

% First National Bank of Arlington
801 North Glebe Road
Arlington, Virginia 22203

73R



\$2.00 provides athletic equipment for 1 child.

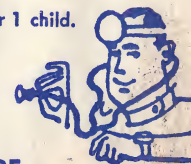
\$3.00 provides medicine for 1 child for 1 week.

\$5.00 provides nursing care for 1 child for 1 week.

\$10.00 provides schooling and supplies for 1 child for 1 month.

\$25.00 provides a brain wave examination (electroencephalogram) for 1 child.

\$100.00 provides a complete diagnostic survey for 1 new patient.



PLEASE PUT YOUR CONTRIBUTION IN THIS ENVELOPE

*To help a child with epilepsy I have enclosed
a donation of \$.....*

We sincerely thank you!

FOR OFFICE USE ONLY: FILE NO. LEDGER NO.

There is hope
for these children ...

And for the estimated 2,000,000 children and adults
like them.

Hope as bright and shining as this new-minted penny ...

Hope and help that you can provide ... for only pennies
a day.

All these people suffer from epilepsy -- which is not
contagious, can be controlled, is not usually, by itself,
any impediment to a normal, happy life.

And The Epilepsy Foundation grants right now are
supporting long-range research which may finally lead
to a cure for epilepsy.

Meantime, other research ... your understanding ...
your pennies a day can provide help right now.

Help for thousands of children who kill time, dully,
alone. Because a playmate's mother whispered:

"Don't play with him. He's not right."

Help for the child who may have an attack in school.
Information and instruction for the teacher ... so that a
child can get at least the same care and attention and
respect as any child who becomes ill in school.

Help for a man who wants to work ... who rots on relief,
because superstition whispers: "Epileptic."

\$2, \$3 - will certainly help one child at the National
Childrens Rehabilitation Center. Invested in research, or
public education, it may eventually help hundreds.

\$5 or \$10 - or more - would represent a major contribution
to our work.

Please say you want to help ... place your contribution in
the enclosed envelope and mail it today. Thank you.

HB:tg

P.S. We pay no commissions to
any agency or individual
for fund-raising.

Sincerely,

Harold Babbitt

Harold Babbitt
President



The Epilepsy Foundation

1419 H Street, N.W., Washington, D. C. 20005



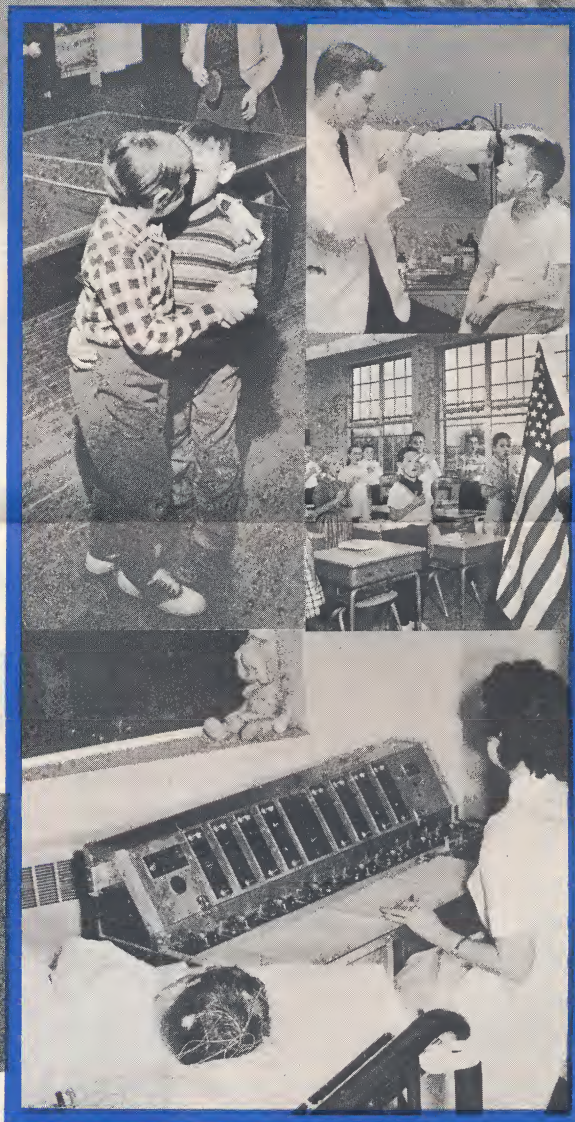
TO: *An Epileptic Child*
FROM: *Those whose hearts*
say, "I want to help."

The National Children's Rehabilitation Center, at Leesburg, Virginia, is fully licensed. The Center staff is made up of qualified, professional personnel in the fields of medicine, education, psychology, social work and psychiatry and is under the direction of Charles Kram, Ph.D. In a home-like atmosphere, where companionship and love are abundant, the child with epilepsy is free of the rejections he has known. With proper constant supervised treatment his seizures are arrested or under control. The chances are that, some happy day, he will take his place in the community as a normal, productive citizen.

This program had its beginnings in 1937 when a Baltimore doctor took two young patients into his own home because he failed to find any proper facilities for them.

Our founders have been occupied with the study and treatment of epilepsy for more than 25 years. They have pioneered in the care and treatment of children. The Center is a tribute to their devotion . . . a tribute to you . . . to the many who have seen good cause to help.

- \$2.00** provides athletic equipment for 1 child.
- \$3.00** provides medicine for 1 child for 1 week.
- \$5.00** provides nursing care for 1 child for 1 week.
- \$10.00** provides schooling and supplies for 1 child for 1 month.
- \$25.00** provides a brain wave examination (electroencephalogram) for 1 child.
- \$100.00** provides a complete diagnostic survey for 1 new patient.



Your contribution is an allowable deduction for income tax purposes.

SPECIAL DELIVERY

EMPLOY EPILEPTICS

FRAGILE

HANDLE WITH CARE

Open Schools To Epileptics

**DO
NOT
BEND**

SPECIAL DELIVERY

EMPLOY EPILEPTICS

FRAGILE

HANDLE WITH CARE

Epileptic Laws Are Outmoded

**DO
NOT
BEND**

SPECIAL DELIVERY

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Employ Epileptics

**DO
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EMPLOY EPILEPTICS

FROM _____

EPILEPSY—Understanding is half the treatment

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USE YOUR LABELS—HELP EPILEPTICS LIVE AND WORK IN DIGNITY
YOUR CONTRIBUTION IS TAX DEDUCTIBLE

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FRAGILE

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VIA AIR MAIL

EMPLOY EPILEPTICS

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THE EPILEPSY FOUNDATION

1419 H STREET, N.W., WASHINGTON, D.C. 20005

Q. Shouldn't I call a doctor?

A. It isn't generally necessary, unless the attack is followed almost immediately by another major seizure, or if the seizure lasts more than about ten minutes.

Q. What should I do after the seizure?

A. Let the patient rest if he wants to, treat the incident in a calm, matter-of-fact manner. Don't embarrass the patient by getting excited or making an issue of the seizure.

Q. Are any organizations doing anything to help persons with epilepsy?

A. Yes. There are voluntary agencies working to eliminate the cruel social, legal, emotional and educational barriers which now prevent persons with epilepsy from enjoying their right to live and work in dignity. The largest of these is The Epilepsy Foundation, with many chapters around the country and a national office in Washington, D. C. There are also a number of smaller organizations interested in epilepsy, as well as certain federal agencies, all of whom recognize the need for action on this important health problem.

Q. What can I do to help?

A. You can support the work of these organizations. You should also inform yourself and others about epilepsy so that many of the myths that now surround this disorder can be eliminated.

PUBLICATIONS AVAILABLE

EPILEPSY, ITS CAUSES, EFFECTS AND TREATMENT—A general description easily understood by the layman.

YOU, YOUR CHILD AND EPILEPSY—An aid to parents in finding resources in their own community where they can get help and information.

A PATIENT'S GUIDE TO ELECTROENCEPHALOGRAPHY—A factual description of what happens when a patient undergoes an EEG examination.

THE STORY OF MORE THAN TWO MILLION PEOPLE—A folder describing in brief terms what epilepsy is and the various problems faced by epileptics in finding jobs, marriage, schools, etc.

EPILEPSY, A SURVEY OF STATE LAWS—A brief report of a two-year study of state laws relating to epileptics covering the following state statutes: marriage, sterilization, workmen's compensation and driver permits. ('65 edition)

NATIONAL CHILDREN'S REHABILITATION CENTER—A description of the Center in Leesburg, Virginia, established by The Epilepsy Foundation for Children with epilepsy, including admission requirements and procedures.

OCCUPATIONAL GUIDES FOR EPILEPSY—Hints on how the epileptic can help himself obtain employment or training for a job.

INTERVIEWING GUIDES FOR EPILEPSY (Reprinted by permission of U.S. Dept. of Labor)—Criteria used in evaluating the work capacity of epileptics.

EDUCATING CHILDREN WHO HAVE EPILEPSY—A concise guide for teachers who may from time to time have epileptic children as students.

WORKMEN'S COMPENSATION AND EPILEPSY—The underwriting and rating of workmen's compensation insurance—with particular reference to the coverage of employees afflicted with epilepsy.

EPILEPSY & INSURANCE—The underwriting and rating for Life and Health Insurance—with particular reference to the coverage of persons afflicted with epilepsy.

EPILEPSY Q. AND A.—Answers to some of the most frequently asked questions about epilepsy.

EPILEPSIA P. y R.—Answers to some of the most frequently asked questions about epilepsy (IN SPANISH).

Single copies of each publication will be sent to individuals free. Bulk copies available to organizations and professional personnel without charge. Write The Epilepsy Foundation, 1419 H St., N.W., Washington, D. C. 20005.

ORDER FORM

Please send the following publications.

NO. OF COPIES	TITLE	NO. OF COPIES	TITLE
☐	Epilepsy, its Causes Effects and Treatment	☐	National Childrens Rehabilitation Center
☐	Educating Children Who Have Epilepsy	☐	Epilepsy, A Survey of State Laws
☐	A Patient's Guide to ElectroEncephaloGraphy	☐	You, Your Child & Epilepsy
☐	The Story of More than Two Million People	☐	Occupational Guides
☐	Interviewing Guides for Epilepsy	☐	Workmen's Compensation and Epilepsy
☐	Epilepsy Q. and A.	☐	Epilepsy & Insurance
	☐ Epilepsia P. y R.		

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NAME _____

ORGANIZATION _____

YOUR POSITION OR TITLE _____

ADDRESS _____

CITY _____ STATE _____

The Epilepsy Foundation

1419 H Street, N.W., Washington, D. C.

20005.

A CHARITABLE, NON-PROFIT ORGANIZATION

EPILEPSY



*Answers to some of the
most frequently asked
Questions about Epilepsy.*

Q. What is epilepsy?

A. Epilepsy is the general name given to the *symptoms* of a number of disorders of the nervous system. It comes from the Greek word for "seizure." The word "epilepsy" is used to describe *what happens* when a brain cell (or group of cells) discharge too much electrical (nervous) energy. Since epilepsy shows itself in different ways, two persons with epilepsy may show very different symptoms.

Q. Generally, what happens when a person has an epileptic seizure?

A. During a seizure, a patient often loses consciousness and control of his muscles for a short time. He is affected only during the seizure and usually for a brief period afterward.

Q. Is epilepsy hereditary?

A. Most doctors don't believe so. In some cases a patient may have inherited tendencies that make it easier to develop seizures, but this is only a tendency, and there are persons who do *not* have epilepsy who have inherited such traits.

Q. Does epilepsy get worse with age?

A. Generally not. In fact some authorities believe that where people have developed epilepsy early in life, the seizures may lessen in frequency and intensity as they grow older. Usually, patients can lead a normal, active, and full life.

Q. Does epilepsy cause mental retardation or insanity?

A. No. Remember, epilepsy is merely a symptom. It cannot cause anything. Most persons with epilepsy are of normal intelligence.

Q. How widespread is epilepsy in the United States?

A. Epilepsy is far more common than many people realize. Most estimates are that 2,000,000 or more Americans have epilepsy. This would be about one in 100 persons. Since epilepsy is not "catching" (and therefore does not fall in the "reportable" category), it has been hard to get comprehensive information about people who have this disorder. Also, many persons with epilepsy conceal their condition because there is so much prejudice and misunderstanding about epilepsy. We do know though, that there were *at least twice* as many known persons suffering from epilepsy as from cancer last year, and there are probably as many as 25,000,000 persons with this affliction throughout the world.

Q. What can doctors do about epilepsy?

A. The doctor is the only person who can diagnose and treat epilepsy properly. In at least half of all cases, seizures can be completely controlled through medication. About another 30 percent of all cases can gain partial control. The doctor is able to do this with careful selection and

follow-up of the right combination of drugs for each patient. A few persons can also be helped through surgery, but this method is generally used only when everything else has been tried first.

Q. Should persons with epilepsy work and do other things most people do?

A. In most cases, absolutely *yes*. It has been found that epilepsy patients have far fewer seizures if they lead active, normal lives. Most of them can work, participate in sports, go to school, drive a car (if they have complete seizure control), marry and have children. In some states they are not permitted to do all of these things, but this outdated attitude is slowly changing, thanks to the work of The Epilepsy Foundation.

Q. Is epilepsy catching? Should one be afraid of a person who has a seizure?

A. Definitely no—to both questions.

Q. What can one do for a person who has a seizure?

A. The first rule is to *keep calm*. There is nothing you can do to stop the seizure once it has begun. Next, do not try to restrain the patient. The area around him should be cleared so that he does not injure himself. Try not to interfere with his movements in any way. Don't force anything between his teeth. If his mouth is already open you might place a *soft* object (for example, a folded handkerchief) between the side teeth.